

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

Approved
 6/7/21 

DATE WELL ABANDONED: 8/5/20 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL: _____

* PERSON ABANDONING WELL: ROBERT COPSEY

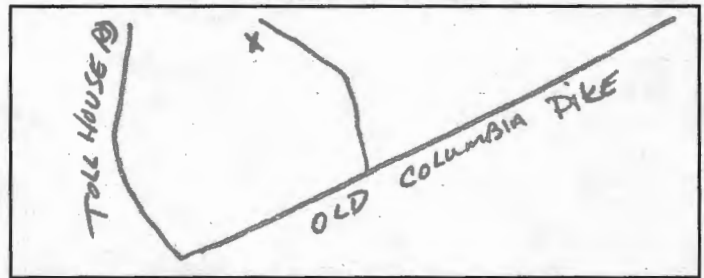
WELL DRILLER'S LICENSE NUMBER: 161

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: DORSEY'S RIDGE LLC

SITE LOCATION MAP

* WELL LOCATION:
 COUNTY: HOWARD
 NEAREST TOWN: ELICOTT CITY
 TAX MAP 0024 BLOCK _____ PARCEL 0260
 SUBDIVISION: 0000
 SECTION: _____ LOT: 1
 STREET ADDRESS: 3956 COOKS LANE



LATITUDE 3 9.154282

LONGITUDE 7 6.485905

LOG OF SEALING MATERIAL

* MATERIAL	FEET	
	FROM	TO
BENTONITE CLAY	112	5
clean fill	5	0
VOLUME OF MATERIAL USED		
<u>145 #5 BENTONITE CLAY</u>		

* TYPE OF WELL BEING ABANDONED:
 DRILLED _____ JETTED _____
 BORED _____ HAND DUG _____
 OTHER (specify) _____

* USE CODE:
 DOMESTIC _____ MUNICIPAL/PUBLIC _____
 IRRIGATION _____ INDUSTRIAL _____
 TEST/OBSERVATION _____ GEOTHERMAL _____

* TYPE OF CASING:
 STEEL _____ PLASTIC _____
 CONCRETE _____ OTHER (specify) _____

SIZE OF CASING: 6" INCHES IN DIAMETER

DEPTH OF WELL: 112' FEET DEEP

WAS ANY CASING REMOVED? YES _____ NO
 If yes, length removed, in feet: 5'

WAS CASING RIPPED OR PERFORATED? _____ YES _____ NO

Robert Copsey
 SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

161
 MWD / MSD / MGS
 CIRCLE ONE

8/5/20
 DATE